



Health Services
LOS ANGELES COUNTY

**Los Angeles County
Board of Supervisors**

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Interim Chief Medical Officer

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www.dhs.lacounty.gov

*To improve health
through leadership,
service and education*



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December 1, 2009

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

**APPROVAL OF SIX LANDSCAPE MAINTENANCE AGREEMENTS
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Approval of six new Proposition A Agreements with Accent Landscape Inc., American Heritage Landscape LP, Mariposa Landscapes Inc., and Parkwood Landscape Maintenance, Inc. for the continued provision of landscape maintenance services at Department of Health Services (DHS) facilities.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Make a finding that the landscape maintenance services, as described herein, continue to be performed more economically by the private sector.
2. Approve and instruct the Chairman of the Board of Supervisors to sign an Agreement with Accent Landscape Inc. (Exhibit I) for the provision of landscape maintenance services at Facility Group A (Harbor-UCLA Medical Center, Long Beach Comprehensive Health Center, and Wilmington Health Center) with an annual contract cost for routine landscape services of \$309,571, and an annual contract cost of \$71,109 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$380,680, effective January 1, 2010 through December 31, 2012.
3. Approve and instruct the Chairman of the Board of Supervisors to sign two Agreements with Mariposa Landscapes Inc. (Exhibits II and III) for the provision of landscape maintenance services at Facility Group B (LAC+USC Healthcare Network, El Monte Comprehensive Health Center, La Puente Health Center, and H. Claude Hudson Comprehensive Health Center), with an annual

contract cost for routine services of \$337,584 and an annual contract cost of \$90,036 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$427,620, and Facility Group C (Martin Luther King, Jr. Multi-Service Ambulatory Care Center and Hubert H. Humphrey Comprehensive Health Center), with an annual contract cost for routine services of \$215,322, and an annual contract cost of \$69,453 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$284,775, effective January 1, 2010 through December 31, 2012.

4. Approve and instruct the Chairman of the Board of Supervisors to sign two Agreements with American Heritage Landscape LP (Exhibits IV and V) for the provision of landscape maintenance services at Facility Group D (Olive View-UCLA Medical Center, Mid-Valley Comprehensive Health Center, and San Fernando Health Center), with an annual contract cost of \$119,366 for routine landscape maintenance services, and an annual contract cost of \$70,470 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$189,836, and Facility Group F (Health Services Administration, Health Services Administration-Commerce, and Public Health-Central Health Center) with an annual contract cost of \$62,541 for routine landscape maintenance services, and an annual contract cost of \$41,064 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$103,605, effective January 1, 2010 through December 31, 2012.
5. Approve and instruct the Chairman of the Board of Supervisors to sign an Agreement with Parkwood Landscape Maintenance Inc. (Exhibit VI) for the provision of landscape maintenance services at Facility Group E (Rancho Los Amigos National Rehabilitation Center), with an annual contract cost of \$198,444 for routine landscape maintenance services, and an annual cost of \$77,168 for as needed, as funded, unscheduled services at a total maximum annual cost not to exceed \$275,612, effective January 1, 2010 through December 31, 2012.
6. Authorize the Interim Director of the Department of Health Services, or his designee, to extend the term of the three-year agreements for up to two (2) additional one-year periods and for an additional term extended beyond the stated expiration date on a month-to-month basis, for a period of time not to exceed six (6) months at the best interest of the County and upon written mutual agreement by the parties.
7. Authorize the Interim Director of the Department of Health Services, or his designee, to delete facilities and to approve necessary changes to scope in services, subject to review and approval by County Counsel, Chief Executive Office, and notification to your Board.

8. Authorize the Interim Director of the Department of Health Services, or his designee, to execute and approve Cost-of-Living Adjustments (COLAs) in the option years, at the Director's discretion, consistent with the Board's COLA policy.

PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTIONS

Approval of the recommended actions will allow for the continued provision of needed landscape maintenance services at DHS Facilities. The existing agreements expire on December 31, 2009.

DHS has been contracting out for landscape maintenance services under provisions of County Code 2.121.250 et seq., "Contracting with Private Businesses" (Prop A) since July 1986.

Contracting under Prop A guidelines continues to be cost effective and operationally feasible for the provision of landscape maintenance services.

Implementation of Strategic Plan Goals

The recommended action supports Goal 1, Operational Effectiveness of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The annual estimated net County contract costs for the provision of routine and unscheduled landscape services at DHS Facilities are identified in Attachment 1. A Cost Analysis for routine services was prepared for each Facility Group in accordance with Auditor-Controller guidelines and methodologies. The Department has determined that the contracts are cost effective. The Department determined that a Cost Analysis for unscheduled services should not be included because services are as needed, as funded, and not guaranteed.

The annual estimated net County contract cost for the six Agreements for the provision of routine landscape maintenance services at DHS Facilities is \$1,242,828, with an estimated annual savings of \$575,789 or 31.66%. The annual estimated net County contract cost for the six Agreements for the provision of unscheduled services at DHS Facilities is \$419,300 at a total maximum annual contract cost of \$1,662,128 for routine and unscheduled landscape maintenance services.

Attachments 1 through 4 provide additional information.

Funding is included in the DHS Fiscal Year (FY) 2009-10 Final Budget and will be requested as a continuing appropriation in future fiscal years' budgets.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Routine landscape maintenance services include: the maintenance of turf, flower beds, ground cover, shrubs, edging, the operation and maintenance of irrigation systems, weed control, and hazard reduction pruning. Unscheduled work includes but is not limited to aerification, fertilization, tree maintenance, pest and rodent control.

Landscape maintenance services fall under Proposition A guidelines and are subject to the provisions of the County's Living Wage Program. The agreements include the new Living Wage Ordinance rates pursuant to Title 2, Chapter 2.201.040, Payment of Living Wage.

The Agreements may be terminated for convenience by the County upon 10-calendar days advance written notice to the contractor.

The Agreements include all Board of Supervisors' required provisions, including the most recent provision - Defaulted Property Tax Reduction Program. Indemnification and insurance provisions have been approved by CEO Risk Management.

County Counsel has approved Exhibits I through VI as to use and form.

CONTRACTING PROCESS

In an effort to achieve efficiency in the contracting process, DHS issued a single Request For Proposals (RFP) to invite proposals for landscape maintenance services for one or more groups of facilities. The Proposition A (Prop A) RFP was released on January 23, 2009.

By the March 13, 2009 submission deadline, DHS received proposals from ten landscape vendors proposing on one or more groups of facilities.

Accent Landscape Inc., Mariposa Landscapes, Inc., American Heritage Landscape LP, and Parkwood Landscape Maintenance Inc. were selected as the successful proposers following completion of the competitive solicitation process conducted by DHS.

The successful proposers received the highest score by Facility Group in the RFP informed averaging evaluation process. The proposed Contractors were selected without regard to race, creed, or color. Contract negotiations with recommended proposers have been completed. The Department has obtained a Letter of Intent from

each of the recommended proposers. Six out of ten landscape proposers requested a debriefing. There were no protests as a result of this solicitation.

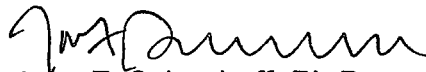
DHS advertised the RFP in the Metropolitan News Enterprise and LA Bulletin newspapers and on the County of Los Angeles websites.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Award of the Agreement will not infringe on the role of the County in its relationship to its residents, and the County's ability to respond to emergencies will not be impaired. The Agreement will not result in reduced services. There is no employee impact as the services are currently being performed under current agreements.

Board approval of the recommended amendment will ensure the continued provision of necessary landscape maintenance services at DHS Facilities.

Respectfully submitted,



John F. Schunhoff, Ph.D.
Interim Director

JFS:pem

Attachments (10)

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors

**DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES
FACILITY GROUP COST SAVINGS ANALYSIS FOR
ROUTINE LANDSCAPE MAINTENANCE SERVICES**

Facility Group	Annual County Estimated Avoidable Costs	Annual Contract Cost *	Annual Estimated Savings	Savings Percentage
A	\$387,715	\$309,571	\$78,144	20.16%
B	\$433,687	\$337,584	\$96,103	22.16%
C	\$280,481	\$215,322	\$65,159	23.23%
D	\$233,690	\$119,366	\$114,325	48.92%
E	\$307,424	\$198,444	\$108,980	35.45%
F	\$175,619	\$62,541	\$113,078	64.39%

*Does not include Unscheduled Work-Seasonal/Periodic Services

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP A
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

<u>COUNTY</u>		
DIRECT		
Salaries	\$289,642	
Employee Benefits	\$80,738	
Total Labor	\$370,380	
Services & Supplies	\$17,335	
TOTAL DIRECT COSTS	\$387,715	
INDIRECT COSTS		
Total Overhead	\$0	
Avoidable Overhead	\$0	
	TOTAL AVOIDABLE COST	<u>\$387,715</u>
<u>CONTRACTOR</u>		
<u>DIRECT</u>		
Salaries	\$154,283	
Payroll Taxes & Workers Comp.	\$53,999	
Total Labor	\$208,282	
Misc. S&S & Other	\$61,452	
TOTAL DIRECT COST	\$269,734	
<u>INDIRECT COSTS</u>		
Employee Retraining	\$0	
Contract Monitoring	\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)	\$39,837	
TOTAL INDIRECT COST	\$39,837	
	TOTAL CONTRACT COST	<u>\$309,571</u>
ANNUAL ESTIMATED SAVINGS FROM CONTRACTING		\$78,144

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP B
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

<u>COUNTY</u>		
DIRECT		
Salaries	\$310,637	
Employee Benefits	\$97,746	
Total Labor	\$408,383	
Services & Supplies	\$25,304	
TOTAL DIRECT COSTS	\$433,687	
INDIRECT COSTS		
Total Overhead	\$0	
Avoidable Overhead	\$0	
	TOTAL AVOIDABLE COST	\$433,687
<u>CONTRACTOR</u>		
<u>DIRECT</u>		
Salaries	\$158,507	
Payroll Taxes & Workers Comp.	\$40,502	
Total Labor	\$199,009	
Misc. S&S & Other	\$59,520	
TOTAL DIRECT COST	\$258,529	
<u>INDIRECT COSTS</u>		
Employee Retraining	\$0	
Contract Monitoring	\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)	\$79,055	
TOTAL INDIRECT COST	\$79,055	
	TOTAL CONTRACT COST	\$337,584
	ANNUAL ESTIMATED SAVINGS FROM CONTRACTING	\$96,103

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP C
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

		<u>COUNTY</u>	
DIRECT			
Salaries		\$191,889	
Employee Benefits		\$61,635	
Total Labor		\$253,524	
Services & Supplies		\$26,957	
TOTAL DIRECT COSTS		\$280,481	
INDIRECT COSTS			
Total Overhead		\$0	
Avoidable Overhead		\$0	
		TOTAL AVOIDABLE COST	\$280,481
			<hr/>
		<u>CONTRACTOR</u>	
<u>DIRECT</u>			
Salaries		\$102,860	
Payroll Taxes & Workers Comp.		\$19,485	
Total Labor		\$122,345	
Misc. S&S & Other		\$40,200	
TOTAL DIRECT COST		\$162,545	
<u>INDIRECT COSTS</u>			
Employee Retraining		\$0	
Contract Monitoring		\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)		\$52,777	
TOTAL INDIRECT COST		\$52,777	
		TOTAL CONTRACT COST	\$215,322
			<hr/>
ANNUAL ESTIMATED SAVINGS FROM CONTRACTING			\$65,159

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP D
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

<u>COUNTY</u>		
DIRECT		
Salaries	\$165,372	
Employee Benefits	\$51,937	
Total Labor	\$217,309	
Services & Supplies	\$16,380	
TOTAL DIRECT COSTS	\$233,690	
INDIRECT COSTS		
Total Overhead	\$0	
Avoidable Overhead	\$0	
	TOTAL AVOIDABLE COST	\$233,690
<u>CONTRACTOR</u>		
<u>DIRECT</u>		
Salaries	\$66,716	
Payroll Taxes & Workers Comp.	\$29,689	
Total Labor	\$96,405	
Misc. S&S & Other	\$13,320	
TOTAL DIRECT COST	\$109,725	
<u>INDIRECT COSTS</u>		
Employee Retraining	\$0	
Contract Monitoring	\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)	\$9,640	
TOTAL INDIRECT COST	\$9,640	
	TOTAL CONTRACT COST	\$119,366
	ANNUAL ESTIMATED SAVINGS FROM CONTRACTING	\$114,325

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP E
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

	<u>COUNTY</u>	
DIRECT		
Salaries	\$226,999	
Employee Benefits	\$64,786	
Total Labor	\$291,785	
Services & Supplies	\$15,639	
TOTAL DIRECT COSTS	\$307,424	
INDIRECT COSTS		
Total Overhead	\$0	
Avoidable Overhead	\$0	
	TOTAL AVOIDABLE COST	<u>\$307,424</u>
	<u>CONTRACTOR</u>	
<u>DIRECT</u>		
Salaries	\$96,468	
Employee Benefits	\$20,520	
Payroll Taxes & Workers Comp.	\$17,832	
Total Labor	\$134,820	
Misc. S&S & Other	\$31,245	
TOTAL DIRECT COST	\$166,065	
<u>INDIRECT COSTS</u>		
Employee Retraining	\$0	
Contract Monitoring	\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)	\$32,379	
TOTAL INDIRECT COST	\$32,379	
	TOTAL CONTRACT COST	<u>\$198,444</u>
ANNUAL ESTIMATED SAVINGS FROM CONTRACTING		\$108,980

**COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LANDSCAPE MAINTENANCE SERVICES-PROPOSITION A CONTRACTING
FACILITY GROUP F
COST COMPARISON FOR ROUTINE LANDSCAPE SERVICES
ESTIMATED AVOIDABLE COST vs. COST OF CONTRACTING**

<u>COUNTY</u>		
DIRECT		
Salaries	\$118,538	
Employee Benefits	\$42,259	
Total Labor	\$160,797	
Services & Supplies	\$14,822	
TOTAL DIRECT COSTS	\$175,619	
INDIRECT COSTS		
Total Overhead	\$0	
Avoidable Overhead	\$0	
	TOTAL AVOIDABLE COST	<u>\$175,619</u>
<u>CONTRACTOR</u>		
<u>DIRECT</u>		
Salaries	\$26,700	
Payroll Taxes & Workers Comp.	\$20,361	
Total Labor	\$47,061	
Misc. S&S & Other	\$7,280	
TOTAL DIRECT COST	\$54,341	
<u>INDIRECT COSTS</u>		
Employee Retraining	\$0	
Contract Monitoring	\$0	
Other (General Accounting, Gross Profit/Fee, Mgmt Overhead)	\$8,200	
TOTAL INDIRECT COST	\$8,200	
	TOTAL CONTRACT COST	<u>\$62,541</u>
	ANNUAL ESTIMATED SAVINGS FROM CONTRACTING	\$113,078

CONTRACTING FOR LANDSCAPE MAINTENANCE SERVICES

Compliance with County Code Requirements

The agreement meets all of the following mandatory requirements of County Code Section 2.121.250, et seq.

- (a) The award of the contracts will be cost effective;
- (b) The County's ability to respond to emergencies will not be impaired;
- (c) The award of the contracts will not result in the unauthorized disclosure of confidential information;
- (d) Alternative resources are available so that the services can be obtained from another source in the event of default by the contractor;
- (e) The award of the contracts will not infringe upon the proper role of the County in its relationship to its citizens;
- (f) The award of the contracts will be in full compliance with all applicable Federal and State regulations;
- (g) Implementation of the contracts will not result in a reduction in County services; and
- (h) The award of the contracts will not violate the provisions of County Code Section 2.180.010, "Certain Contracts Prohibited".

The agreements also contain provisions recommended by the County Risk Manager to cover the County's potential tort liability. The Contractor will provide evidence of the required insurance coverage prior to the commencement of services.

Participation in the contracting process by minority vendors was solicited by advertising in the Los Angeles Sentinel, Eastern Group publications, and Rapid Publishing and distributing notices by mail to firms listed on the Department's proposers' list and on the Los Angeles County Office of Small Business' Web Site.

Selections for award of the contracts were made without regard to race, creed or color.

COUNTY OF LOS ANGELES

COMMUNITY BUSINESS ENTERPRISE (CBE) PROGRAM

FIRM/ORGANIZATION INFORMATION

**Request for Local SBE Preference Program Consideration and
CBE Firm/Organization Information Form**

INSTRUCTIONS: All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:

FIRM NAME: Accent Landscape, Inc.

☒ As a Local SBE, certified by the County of Los Angeles Office of Affirmative Action Compliance, I request this proposal/bid be considered for the Local SBE Preference.

☒ Attached is my Local SBE Certification letter issued by the County

II. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability.

Business Structure: ☐ Sole Proprietorship ☐ Partnership ☒ Corporation ☐ Non-Profit ☐ Franchise
☐ Other (Please Specify)

Total Number of Employees (including owners):

Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories:

Race/Ethnic Composition	Owners/Partners/ Associate Partners		Managers		Staff	
	Male	Female	Male	Female	Male	Female
Black/African American						
Hispanic/Latino			1		17	3
Asian or Pacific Islander	1	1			1	
American Indian						
Filipino						
White						

III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed.

	Black/African American	Hispanic/Latino	Asian or Pacific Islander	American Indian	Filipino	White
Men	%	%	10 %	%	%	%
Women	%	%	90 %	%	%	%

IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)

Agency Name	Minority	Women	Dis- advantaged	Disabled Veteran	Expiration Date
LAC MTA	✓	✓			5/27/09

V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Print Authorized Name: Robert Izumi Authorized Signature: [Signature] Title: Pres. Date: 3/10/09

**Request for Local SBE Preference Program Consideration and
CBE Firm/Organization Information Form**

INSTRUCTIONS: All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:

FIRM NAME:

AMERICAN HERITAGE LANDSCAPE

- ☐ As a Local SBE, certified by the County of Los Angeles Office of Affirmative Action Compliance, I request this proposal/bid be considered for the Local SBE Preference.
☐ Attached is my Local SBE Certification letter issued by the County

II. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability.

Business Structure: ☐ Sole Proprietorship ☒ Partnership ☐ Corporation ☐ Non-Profit ☐ Franchise
☐ Other (Please Specify)

Total Number of Employees (including owners): 223

Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories:

Race/Ethnic Composition	Owners/Partners/ Associate Partners		Managers		Staff	
	Male	Female	Male	Female	Male	Female
Black/African American						1
Hispanic/Latino			2		197	2
Asian or Pacific Islander						2
American Indian						
Filipino						
White	3	1	4	2	8	3

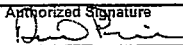
III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed.

	Black/African American	Hispanic/ Latino	Asian or Pacific Islander	American Indian	Filipino	White
Men	%	%	%	%	%	83 %
Women	%	%	%	%	%	17 %

IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)

Agency Name	Minority	Women	Dis- advantaged	Disabled Veteran	Expiration Date
N/A					
N/A					

V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Print Authorized Name	Authorized Signature	Title	Date
David Price		CFO	3-12-09

**Request for Local SBE Preference Program Consideration and
SBE Firm/Organization Information Form**

INSTRUCTIONS: All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:

FIRM NAME:

N/A

☐ As a Local SBE, certified by the County of Los Angeles Office of Affirmative Action Compliance, I request this proposal/bid be considered for the Local SBE Preference.

☐ Attached is my Local SBE Certification letter issued by the County

II. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability.

Business Structure: ☐ Sole Proprietorship ☐ Partnership ☒ Corporation ☐ Non-Profit ☐ Franchise
☐ Other (Please Specify)

Total Number of Employees (including owners):

Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories:

Race/Ethnic Composition	Owner (Partner) Associate Partners		Managers		Staff	
	Male	Female	Male	Female	Male	Female
Black/African American					1	
Hispanic/Latino	1		2		359	5
Asian or Pacific Islander				1	1	2
American Indian						
Filipino						
White			1		2	

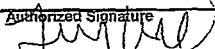
III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed.

	Black/African American	Hispanic/Latino	Asian or Pacific Islander	American Indian	Filipino	White
Men	%	100 %	%	%	%	%
Women	%	%	%	%	%	%

IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)

Agency Name	Minority	Women	Disadvantaged	Disabled Veteran	Expiration Date
County of Los Angeles	X				10/27/2009
City of Los Angeles	X				5/31/2009

V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Print Authorized Name	Authorized Signature	Title	Date
Terry Noriega		President	3/13/2009

**Request for Local SBE Preference Program Consideration and
CBE Firm/Organization Information Form**

INSTRUCTIONS: All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:

FIRM NAME: PARKWOOD LANDSCAPE MAINTENANCE, INC.

- ☐ As a Local SBE, certified by the County of Los Angeles Office of Affirmative Action Compliance, I request this proposal/bid be considered for the Local SBE Preference.

☒ Attached is my Local SBE Certification letter issued by the County.

II. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability.

Business Structure: ☐ Sole Proprietorship ☐ Partnership ☒ Corporation ☐ Non-Profit ☐ Franchise
☒ Other (Please Specify)

Total Number of Employees (including owners): 130

Race/Ethnic Composition of Firm: Please distribute the above total number of individuals into the following categories:

Race/Ethnic Composition	Owners/Partners/ Associate Partners		Managers		Staff	
	Male	Female	Male	Female	Male	Female
Black/African American						
Hispanic/Latino			2		124	1
Asian or Pacific Islander	1					
American Indian						
Filipino						
White						2


III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed.

	Black/African American	Hispanic/Latino	Asian or Pacific Islander	American Indian	Filipino	White
Men	%	%	100 %	%	%	%
Women	%	%	%	%	%	%

IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)

Agency Name	Minority	Women	Dis- advantaged	Disabled Veteran	Expiration Date

V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Print Authorized Name DAVID MELITO	Authorized Signature 	Title PRESIDENT	Date MARCH 11, 2009
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